## **BEST AVAILABLE COPY**

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2001

10 044289

		CLAIMS AS	FILED - (Column			(Column 2)		SMALL ENTITY TYPE		OR		OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			23					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			~2 3 minus 20=		• 3			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			5 minus 3 =		. 2			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
* If the difference in column 1 is less than zero, ente					r "0" in c	olumn 2		TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)						(Column 3)		SMALLE	NTITY	OR	OTHER SMALL		
		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total .	• 23	Minus .	<b></b> 9	-3	= /		X\$ 9=		OR	X\$18=		
	Independent	• 5	Minus	***	5	<del> </del>	4	X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENUEN	CLAIM		J	+140=.	•	OR	+280=		
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		
		1											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus			=		X\$ 9=		OR	X\$18=		
	Independent	• .	Minus	***		-		X42=		OR	X84=	·	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		J	+140=		OR	+280=		
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	ımn 2)	(Column 3	5.	AUII, FLEI		-	, agrarit, I haba		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE'	
20	Total	•	Minus	**		2		X\$ 9=		OR	X\$18=		
KE	Independent	*	Minus	***		=-		X42=		OR	X84=		
1	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM		L						
	H the atou is sale	mn 1 je lace than t	he entry in ca	umn 2 wel	te "0" in «	dumn 3.		+140=		OR	+280=		
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, nter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, nter "3."													
	The "Highest Nur	nb r Pr viously Pa	aid For (Total	or Indepen	dent) is the	highest num	ber fo	und in the ap	propriate bo	x in c	olumn 1.		